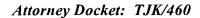
PTO/SB/17 (04-07)
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Eff	ective on 12/08/2	004.		Complete If Known				
Fees pursuant to the Consc	_	ntions Act 2000(HER. 4	Apr	olication Number	10/810,541			
FEE TR	KANSI	MYCIAL	Apr Filir	ng Date	March 26, 2	004		
Fo	r FY 20	OF MAY 0 7 20	107 Lirs	st Named Inventor	Sayaka KAV	VASHIM	A	
1 0			#/Exa	aminer Name	Dawn L. Gar			
Applicant claims small	entity status. S	ee 37 1.27	Art	Unit	1774			
TOTAL AMOUNT OF PAYMENT (\$)1,700.00				orney Docket No.	TJK/460	TJK/460		
METHOD OF PAYMENT (check all that apply)								
Check Credit Card Money Order Other (please identify):								
Deposit Account Deposit Account Number: 19-1351 Deposit Account Name: Seyfarth Shaw LLP								
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)								
Charge fee(s) indicated below Charge any additional fee(s) or underpayments of fee(s) Under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.								
FEE CALCULATION				·-·			··········	
1. BASIC FILING, SE				5550	EVALABLATION	5550		
	FILING F	EES S mall Entity	SEARCH	Small Entity	EXAMINATION Sm	FEES all Entity		
Application Type	Fee (\$)		ee (\$)	Fee (\$)		ee (\$)	Fees Paid (\$)	
Utility	300	150	500	250	200	100		
Design	200	100	100	50	130	65		
Plant	200	100	300	150	160	80		
Reissue	300	150	500	250	600	300		
Provisional	200	100	0	0	0	0		
2. EXCESS CLAIM FEES Small Entity								
Fee Description					!	Fee (\$)	<u>Fee (\$)</u>	
Each claim over 20 (in						50 200	25	
Each independent claim over 3 (including Reissues)							100 180	
Multiple dependent claims Total Claims Extra Claims Fee (\$) Fees Paid (\$)							ndent Claims	
							Fee Paid (\$)	
HP = highest number of total								
Indep. Claims	Extra Clair		Fees Pa	aid (\$)				
- 3 or HP HP = highest number of inde		x id for, if greater than 3	=					
3. APPLICATION SIZE FEE								
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50								
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).								
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) - 100 = /50= (round up to a whole number) x =								
- 100 = /50= (round up to a whole number) x = 4. OTHER FEE(S) Fee Paid (\$)								
Non-English Specification, \$130 fee (no small entity discount)								
Other (e.g., late filing surcharge): <u>Issue Fee & Publication Fee</u>								
SUBMITTED BY								
Signature	*			stration No. 35,56	57	Telephon	e 312-460-5000	
Name (Print/Type) Time	ame (Print/Type) Timothy J. Keefer (Attorney/Agent)					Date May 2, 2007		

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent A	Application of:)			
Sayaka KAWASHIMA)			
Application No.: 10/810,541)	GAS BARRIER SUBSTRATE		
Filing Date: March 26, 2004)	Customer No. 27,717		
	TRANS	MITT	AL LETTER		
P.O. Box 145	VA 22313-1450				
Dear Sir:					
Pleas	se find enclosed the following in	the ab	ove-captioned patent application:		
1.	Fee Transmittal				
2.	Part B – Fee(s) Transmittal in duplicate;				
3.	A check in the amount of \$1,700.00 in payment of the issue fee and publication fee;				
and					
4.	Certificate of Mailing and Po	stcard.			
Please charge any additional fees to Deposit Account No. 19-1351. A duplicate of this					
transmittal is	enclosed.				
Pleas	se acknowledge receipt of the ab	ove by	returning the enclosed self-addressed, stamped		
postcard.					
		Resp	pectfully Submitted,		
Date:	May 2, 2007	Time	othy J. Keefer, Reg. No. 35,567		
SEYFARTH 131 S. Dearb	SHAW LLP		•		

SEYFARTH SHAW LLP 131 S. Dearborn Suite 2400 Chicago, Illinois 60603 Telephone: (312) 460-5000 Facsimile: (312) 460-7000